Recipient Report: Grant or Loan Version: 1.3 Prime Recipient

| Reporting Information | | | | | |
|---|---------------|---|--|--|--|
| Award Type* Award Number* Final Report* | | | | | |
| | | | | | |
| Grant | S-09-MY-13007 | n | | | |

| Award Recipient Information | | | | | | |
|---|--|--|--|--|--|--|
| Recipient DUNS Number* Recipient Account Number Recipient Congressional District* | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 12 | | | | | | |

| Award Information | | | | |
|--|---|-------------|--|--|
| Funding Agency Code* | Awarding Agency Code* | Award Date* | | |
| 8600 | 8600 | 07/16/2009 | | |
| Amount of Award* | CFDA Number* | | | |
| \$1,121,523.00 | 14.257 | | | |
| Program Source (TAS)* | Sub Account Number for Program Source (TAS) | | | |
| 86-0193 | | | | |
| Total Number of Sub Awards to Individuals* | Total Amount of Sub Awards to Individuals* | | | |
| 0.00 | \$0.00 | | | |
| Total Number of Payments to Vendors less than \$25,000/award* | Total Amount of Payments to Vendors less than \$25,000/award* | | | |
| 0.00 | \$0.00 | | | |
| Total Number of Sub Awards less than \$25,000/award* | Total Amount of Sub Awards less than \$25,000/award* | | | |
| 0.00 | \$0.00 | | | |
| Award Description* | | | | |

| Need Help Finding Award Information? | | | |
|---|--|--|--|
| Browse the Full Listings by using the drop-down lists. | | | |
| Agency Drop-Down List: | 0500 - Government Accountability Office | | |
| | 97-0150-TRICARE Management Activity- Defense Health Program, Recovery Act | | |
| Know the code and want to check the name? Search by Code | | | |
| Enter Agency Code: | 0500 | | |
| Agency Name: | Government Accountability Office | | |
| Enter Program Source (TAS) Code: | 05-0108 | | |
| Program Source (TAS) Name: | Government Accountability Office-Salaries and Expenses, Recovery Act | | |
| Know the na | ame and want to find the code? Search by Name | | |
| Enter Agency Name: | Government Accountability Office | | |
| Agency Code: | 0500 | | |
| · · | Government Accountability Office-Salaries and Expenses, Recovery Act | | |
| Program Source (TAS) Code: | 05-0108 | | |

The City of Savannah will use HPRP funds to provide eligible financial assistance, housing relocation/stabilization and case management services to persons who are at risk of becoming homeless and those who have recently become homeless.

- Financial assistance will include short-term rental assistance, medium-term rental
 assistance, medium-term rental assistance, security deposits, utility deposits, utility payments, moving cost assistance, and motel or hotel vouchers.
- Housing relocation and stabilization services will include the following activities: case management, outreach, housing search and placement, legal services, and credit repair.
- Data collection and evaluation costs will include those costs associated with operating the homeless management information systems for purposes of collecting unduplicated counts of homeless persons and analyzing patterns of use of HPRP funds.

Number of characters entered: 952

| Project Information | | |
|---|---|---|
| Project Name or Project/Program Title* | Project Status* | Total Federal Amount ARRA Funds Received/Invoiced* |
| | | |
| | | |
| Homeless Prevention and Rapid Rehousing | Less than 50% completed | \$0.00 |
| Number of Jobs* | Description of Jobs Created* | |
| | The City of Savannah's subgrantee will employ two (2) case managers who will be responsible for conducting intake and needs assessments for the development of a self-sufficiency plan with HPRP clients, arrange, coordinate, monitor, and deliver services related to meeting the housing needs of program participants, and maintain demographic and statistical documentation of those served in the Homeless Management Information System (HMIS). | |
| 2.00 | Number of characters entered: 441 | |

Quarterly Activities/Project Description*

who are at risk of becoming homeless and those who have recently become homeless.

- Financial assistance will include short-term rental assistance, medium-term rental
 assistance, medium-term rental assistance, security deposits, utility deposits, utility payments, moving cost assistance, and motel or hotel vouchers.
- Housing relocation and stabilization services will include the following activities: case management, outreach, housing search and placement, legal services, and credit repair.

Number of characters entered: 952

| Activity Code (NAICS or NTEE-NPC)* | | | | |
|------------------------------------|--------|---|--|--|
| 1 | 923130 | 2 | | |
| 3 | | 4 | | |

| Need Help Finding an Activity, State, or Country Code? | | | | |
|--|-------------------------|--|--|--|
| | | | | |
| Browse the Full Listing by using the drop-down list. | | | | |
| Activity Code Drop-Down | Activity Code Drop-Down | | | |
| List: | Z99 - NTEE - Unknown | | | |
| | | | | |
| State Drop-Down List: AK - Alaska | | | | |

| 5 | l 6l | 7 | | T |
|---|---|---|-------------------------|---|
| 5 | | | Country Drop-Down List: | US - United States |
| 7 | 8 | | Know the co | de and want to check the name? Search by Code |
| 9 | 10 | | Enter Activity Code: | 111110 |
| Total Federal Amount of ARRA Expenditure* | Total Federal ARRA Infrastructure Expenditure | Infrastructure Contact Name | Activity Name: | Soybean Farming |
| | | | Enter State Code: | CA |
| Infrastructure Contact Email | Infrastructure Contact Phone | Infrastructure Contact Phone Ext | State Name: | |
| | | | Enter Country Code: | US |
| Infrastructure Contact Street Address 1 | Infrastructure Contact Street Address 2 | Infrastructure Contact Street Address 3 | Country Name: | United States |
| | | | Know the n | ame and want to find the code? Search by Name |
| Infrastructure City | Infrastructure State | Infrastructure ZIP Code+4 | Enter Activity Name: | Other Vegetable (except Potato) and Melon Farming |
| | | | Activity Code: | 111219 |
| Infrastructure Purpose and Rationale | | | Enter State Name: | California |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | State Code: | CA |
| Number of characters entered: 0 | | | Enter Country Name: | United States |
| | | | Country Code: | us |

| Primary Place of Performance | | | | |
|------------------------------|------------------|-------------------------|--|--|
| Street Address 1 | Street Address 2 | City* | | |
| Bull and Bay | | Savannah | | |
| State* | ZIP Code+4* | Congressional District* | | |
| | | | | |
| GA | 314011027 | 12 | | |
| Country* | | | | |
| | | | | |
| US | | | | |

| Recipient Highly Compensated Officers | | | | | |
|---|---|--------------|----------------------|--|--|
| Prime Recipient Indication of Reporting Applicability* | # | Officer Name | Officer Compensation | | |
| No | 1 | | | | |
| | 2 | | | | |
| | 3 | | | | |
| | 4 | | | | |
| | 5 | | | | |